SESSION X CRIMINAL DJUPRILE JURY DIAGISTRATE HEARING NAME ADDRESS AND ZIP CODE OF DEFENDANT  COMMONWealth VS.    Commonwealth Vs.	X SUMMONS FOR WITNESS		DOCKET NUMBER			Trial Court of Massachusetts		
Quincy District Court	SESSION: x CRIMINAL	□.IUVENII E	□.IURY □ MAGISTRATE HEARING					
Commonwealth vs.    1								
Date and time   Date								
THE DATE DATE AND TIME OF APPEARANCE  9/7/2011 9am  DATE TIME  9/7/2011 9am  DATE TIME  DATE TIME  PRESENS  NAME. ADDRESS AND ZIP CODE OF WITNESS  AND ZIP CODE OF WITNESS  OFFENSE(S)  Drug possession to Distribute Class A Conspiracy to Violate Drug Law Drug widelation near school zone Cocaine possession to distribute  TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS IN THE COMMONWEALTH: You are hereby commanded to forthwith serve the annewed summons upon the defendant or witness named within by delivering it to the defendant or witness version of suitable and discretion then residing therein, or by mailing it to the last known address of the defendant or witness.  NOTE: A summons for a witness may also be served by any person authorized to serve a summons in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure.  To the above named Witness: You are hereby required in the name of the Commonwealth, to make your appearance before the Justices of the Court on the date and time noted above, and to appear from time to time and day to day thereafter as ordered. You are further required to bring with you:  WITNESS:  WITNESS:  March 15, 2017  RETURN OF SERVICE  I hereby certify that I served the within summons upon the above named Defendant Witness by  Delivering a copy of it at the dwelling house or usual place of abode of the defendant or witness.  Leaving a copy of it at the dwelling house or usual place of abode of the defendant or witness with a person of suitable age and discretion residing therein.  X Mailing a copy of it to the last known address of the defendant or witness.  DATE RECEIVED  DATE RECEIVED  DATE RECEIVED  DATE OF PERSON MAKING SERVICE  ITILE OF PERSON MAKING SERVICE	Commonwealth vs.				Quincy, MA 02169		ł	
AND TIME    SPECIFIED				Presiding	j Justice: Hon. Ma	ark S. Coven		
AME, ADDRESS AND ZIP CODE OF WITNESS  NAME, ADDRESS AND ZIP CODE OF WITNESS  Kate Corbett Department of Public Health William A Hinton State Laboratory 305 South Street Jamaics Plain, MA 02130  TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS IN THE COMMONWEALTH: You are hereby commanded to forthwith serve the annexed summons upon the defendant or witness named within by delivering it to the defendant or witness personally or by leaving it at the dwelling house or usual place of abode of the defendant or witness with some person of suitable and discretion then residing therein, or by mailing it to the last known address of the defendant or witness.  NOTE: A summons for a witness may also be served by any person authorized to serve a summons in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure.  To the above named Witness: You are hereby required in the name of the Commonwealth, to make your appearance before the Justices of the Court on the date and time noted above, and to appear from time to time and day to day thereafter as ordered. You are further required to bring with you:  WITNESS:  Michael W. Morrissey, District Attorney  March 15, 2017  RETURN OF SERVICE  I hereby certify that I served the within summons upon the above named Defendant Witness by  Delivering a copy of it at the dwelling house or usual place of abode of the defendant or witness.  Leaving a copy of it at the dwelling house or usual place of abode of the defendant or witness with a person of suitable age and discretion residing therein.  X Mailing a copy of it to the last known address of the defendant or witness.  DATE OF PERSON MAKING SERVICE  DATE OF PERSON MAKING SERVICE  I was unable to make service				DATE AN	ID TIME OF ADD	EADANCE		
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Department of Public Health   Conspiracy to Violate Drug Law   Drug violation near school zone   Cocaine possession to distribute		ZIP CODE C	VI WITHESS		` '	uto Class A		
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